



## DIVISION OF HEALTH AND MEDICAL SERVICES

Community Health Services  
Disease Prevention  
Family Health  
Health Promotion  
State Epidemiologist

### MRSA and School Sports: Questions & Answers

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**What is MRSA?** MRSA is a *Staphylococcus aureus* ("staph") bacterium that is resistant to some antibiotics, like methicillin, oxacillin, penicillin, and amoxicillin (*Methicillin-Resistant Staphylococcus aureus* = MRSA).

#### **Prevention:**

- Cover all wounds. If a wound cannot be covered adequately, consider excluding players with potentially infectious skin lesions from practice or competitions until the lesions are healed or can be covered.
- Good hygiene. Shower with soap after practices and games.
- No sharing of towels and personal items.
- Wash hands frequently with soap and water or use an alcohol hand gel when washing is not possible.
- Establish routine cleaning schedules for shared equipment.
- Train athletes and coaches in first aid for wounds and recognition of infected wounds.
- Report skin lesions to coaches.

**How is MRSA spread?** Staph, including MRSA, is spread by direct skin-to-skin contact, such as shaking hands, wrestling, or other skin contact. Staph is also spread by objects touched by people with staph, like towels or shared athletic equipment.

Most people who have staph or MRSA are not sick. These people are "colonized" with staph. Staph disease starts when the bacteria gets into a cut, scrape or other break in the skin. People who have skin infections should be careful to avoid spreading the infection to others.

#### **Symptoms of a MRSA infection?**

MRSA symptoms are similar to other staph infections. Pimples, rashes, impetigo, pus-filled boils, when painful, warm, red or swollen, can be

staph or MRSA. Staph and MRSA can cause more serious infections, such as severe skin infections, surgical wound infections, bloodstream infections and pneumonia.

**MRSA treatment?** Most MRSA infections are treated by good wound and skin care: keeping the wound clean and dry, washing hands after caring for the sore and carefully disposing of bandages. Sometimes treatment requires the use of antibiotics. If antibiotics are needed, use the medication as directed by a healthcare provider.

#### **Are athletes at risk for MRSA infection?**

Many people, including athletes, carry staph or MRSA in their nose and skin without knowing it. They usually do not get skin infections. However, some factors can lead to MRSA infections among athletes, including close skin-to-skin contact, openings in the skin such as cuts or abrasions (may occur with body shaving or floor burns), contaminated objects and surfaces, crowded conditions and relaxed hygiene. MRSA infections may sometimes occur among healthy students with no identifiable risk factors. MRSA infections have occurred among wrestling, volleyball, basketball, football and hockey players.

#### **If an athlete has staph or MRSA?**

##### **Precautions:**

- Treat any draining wound as a potential MRSA infection.
- Cover wound fully at all times, especially during direct contact with other athletes.
- Evaluation by a healthcare provider.

##### **Caring for MRSA at school:**

- Practice frequent handwashing and use hand gel sanitizer when soap and water are not available.
- The athlete may participate in team activities, but be sure the wound is always fully covered.

- Do not allow an athlete with a MRSA infection to use whirlpools or hot tubs.
- Do not share towels.
- Follow good hygienic practices—washing hands, showering, and regularly laundering clothes.
- Use commercial disinfectant or fresh diluted bleach solution to clean sports equipment and play area that may come in contact with the wound before other athletes have contact with the equipment or area.
- Use clean, non-sterile gloves when caring for the wound or touching broken skin. Remove gloves promptly after use and discard before touching uncontaminated items and surfaces, and before treating another athlete.
- Wash hands immediately after contact with a wound or broken skin, even if gloves were worn.
- Wash hands between tasks and procedures on the same athlete to prevent cross-contamination of different body sites.
- Cover treatment tables. Discard or launder coverings after each use.
- Place disposable items that have had contact with an infected site in a separate trash bag, and secure bag before placing in the garbage.
- Do not give other team members prophylactic antibiotics.

### **If an athlete has MRSA, should all athletes be tested and treated?**

All athletes do not need be tested and treated if an athlete in a school has MRSA infection. Any athlete with a skin infection should be seen by their healthcare provider to determine the best management.

### **Should parents and staff be alerted if an athlete has MRSA infection?**

When MRSA occurs in a school, consult with the school nurse or school physician to determine, based on medical judgment, whether some or all parents and staff should be notified. When necessary, consult the Department of Health.

### **MRSA prevention among athletes.**

Practicing good hygiene is the best way to prevent getting and spreading MRSA infections and other infections.

You should . . . . .

- Keep hands clean by washing frequently with soap and warm water or using an alcohol-based hand sanitizer gel when washing is not possible.
- Shower with soap and water as soon as possible after direct contact sports, and use a clean, dry towel.
- Keep cuts and scrapes clean and covered with a bandage until healed.
- Avoid contact with other people's wounds or bandages.
- Not share towels (even on the sidelines during a game), razors, or other personal care items.
- Not share ointments or antibiotics.
- Wash towels, uniforms, scrimmage shirts, underwear and other clothes in hot water and detergent after each use. Inform parents of precautions if laundry is sent home.
- Avoid common whirlpools or hot tubs, especially with open wounds, boils, scrapes or scratches.
- Inform the coach or trainer if you think you have a skin infection.
- Clean the athletic area, mats and sports equipment routinely using a commercial disinfectant or a fresh solution of 1 part bleach to 100 parts water (1 tablespoon bleach to 1 quart water).
- It is not normally useful to disinfect entire schools or close the school when a student has MRSA.

**Please see CDC website “Questions and Answers about Methicillin-Resistant *Staphylococcus aureus* (MRSA) in Schools” at [www.cdc.gov/Features/MRSAinSchools](http://www.cdc.gov/Features/MRSAinSchools)**